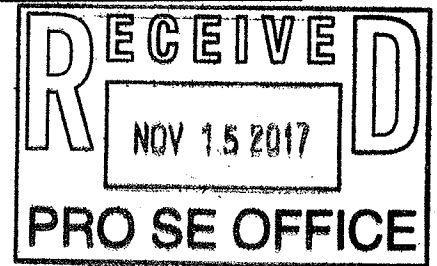


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK



AUGUSTINE EDUBOR-OSULA, SR.

17 CV 8939

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

Do you want a jury trial?

☒ Yes ☐ No

CITY OF NEW YORK DEPARTMENT OF
HOUSING PRESERVATION (HPD);

JOSHUA CUCCHIARO (ASSISTANT COMMISSIONER); TONYA MORGAN; DEREK SMITH;
DEMETRIO SURIN; FREDERICK THOMASEL;

Write the full name of each defendant. The names listed above must be identical to those contained in Section I.

DANIEL CARCANA;
DAVE MCCREDU, PRESIDENT LOCAL 211,
OPERATING ENGINEERS

EMPLOYMENT DISCRIMINATION COMPLAINT

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. PARTIES**A. Plaintiff Information**

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

AUGUSTINE O EDOBOR-OSULA, SR
 First Name Middle Initial Last Name
151 WEST 145TH STREET APT. 5A
 Street Address
NEW YORK NY 10039
 County, City State Zip Code
(347) 481-7879 OSULASR@GMAIL.COM
 Telephone Number Email Address (if available)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. (Proper defendants under employment discrimination statutes are usually employers, labor organizations, or employment agencies.) Attach additional pages if needed.

Defendant 1: CITY OF NEW YORK DEPARTMENT OF HOUSING
 Name
 100 GOLD STREET
 Address where defendant may be served
 NEW YORK NY 10038
 County, City State Zip Code

Defendant 2: VITO MUSTACIUOLO
 Name
 100 GOLD STREET
 Address where defendant may be served
 NEW YORK NY 10038
 County, City State Zip Code

Defendant 3:

JOSHUA CUCCHIARO

Name

100 GOLD STREET

Address where defendant may be served

NEW YORK

County, City

NY

State

10038

Zip Code

II. PLACE OF EMPLOYMENT

The address at which I was employed or sought employment by the defendant(s) is:

CITY OF NEW YORK DEPARTMENT OF HOUSING

Name

100 GOLD STREET

Address

NEW YORK

County, City

NY

State

10038

Zip Code

III. CAUSE OF ACTION**A. Federal Claims**

This employment discrimination lawsuit is brought under (check only the options below that apply in your case):

- ☐ Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000e to 2000e-17, for employment discrimination on the basis of race, color, religion, sex, or national origin

The defendant discriminated against me because of my (check only those that apply and explain):

☐ race:☐ color:☐ religion:☐ sex:☐ national origin:

DEFENDANT 4:

TONYA MORGAN
100 GOLD STREET
NEW YORK NY 10038

DEFENDANT 5:

DEREK SMITH
100 GOLD STREET
NEW YORK NY 10038

DEFENDANT 6:

DEMETRIO SURUN
100 GOLD STREET
NEW YORK NY 10038

DEFENDANT 7:

FREDERICK THOMASEL
100 GOLD STREET
NEW YORK NY 10038

DEFENDANT 8:

DANIEL CARCANA
100 GOLD STREET
NEW YORK NY 10038

DEFENDANT 9:

DAVE MCCREDO, PRESIDENT LOCAL 211 OPERATING
225 BROADWAY ENGINEER
NEW YORK NY 10038

DEFENDANT 10:

JOSHUA CUCCHIARO
100 GOLD STREET
NEW YORK, NY 10038

- ☒ 42 U.S.C. § 1981, for intentional employment discrimination on the basis of race

My race is: BLACK

- ☐ Age Discrimination in Employment Act of 1967, 29 U.S.C. §§ 621 to 634, for employment discrimination on the basis of age (40 or older)

I was born in the year: _____

- ☐ Rehabilitation Act of 1973, 29 U.S.C. §§ 701 to 796, for employment discrimination on the basis of a disability by an employer that constitutes a program or activity receiving federal financial assistance

My disability or perceived disability is: _____

- ☐ Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101 to 12213, for employment discrimination on the basis of a disability

My disability or perceived disability is: _____

- ☐ Family and Medical Leave Act of 1993, 29 U.S.C. §§ 2601 to 2654, for employment discrimination on the basis of leave for qualified medical or family reasons

B. Other Claims

In addition to my federal claims listed above, I assert claims under:

- ☒ New York State Human Rights Law, N.Y. Exec. Law §§ 290 to 297, for employment discrimination on the basis of age, race, creed, color, national origin, sexual orientation, military status, sex, disability, predisposing genetic characteristics, marital status
- ☒ New York City Human Rights Law, N.Y. City Admin. Code §§ 8-101 to 131, for employment discrimination on the basis of actual or perceived age, race, creed, color, national origin, gender, disability, marital status, partnership status, sexual orientation, alienage, citizenship status
- ☒ Other (may include other relevant federal, state, city, or county law):

FEDERAL EEOC

IV. STATEMENT OF CLAIM

A. Adverse Employment Action

The defendant or defendants in this case took the following adverse employment actions against me (check only those that apply):

- ☐ did not hire me
- ☐ terminated my employment
- ☐ did not promote me
- ☐ did not accommodate my disability
- ☒ provided me with terms and conditions of employment different from those of similar employees
- ☒ retaliated against me
- ☒ harassed me or created a hostile work environment

☒ other (specify): FINANCIAL DEPRIVATION (LOSS OF PAY AND OTHER BENEFITS)

B. Facts

State here the facts that support your claim. Attach additional pages if needed. You should explain what actions defendants took (or failed to take) *because of* your protected characteristic, such as your race, disability, age, or religion. Include times and locations, if possible. State whether defendants are continuing to commit these acts against you.

THE DEFENDANTS COLLUDED TO ILLEGALLY TERMINATE MY EMPLOYMENT AS RETALIATION DUE TO MY COMPLAINT OF DISCRIMINATION AND NEPOTISM, AND ARE STILL HARASSING ME TO DATE WITH FRIVOLOUS CHARGES, CREATING FINANCIAL CONSTRAINTS BY CONSTANTLY SUSPENDING ME FROM EMPLOYMENT, AND REFUSING TO PAY FOR MY APPROVED PAID VACATION.

As additional support for your claim, you may attach any charge of discrimination that you filed with the U.S. Equal Employment Opportunity Commission, the New York State Division of Human Rights, the New York City Commission on Human Rights, or any other government agency.

V. ADMINISTRATIVE PROCEDURES

For most claims under the federal employment discrimination statutes, before filing a lawsuit, you must first file a charge with the U.S. Equal Employment Opportunity Commission (EEOC) and receive a Notice of Right to Sue.

Did you file a charge of discrimination against the defendant(s) with the EEOC or any other government agency?

☒ Yes (Please attach a copy of the charge to this complaint.)

When did you file your charge?

JULY 2017

☐ No

Have you received a Notice of Right to Sue from the EEOC?

☒ Yes (Please attach a copy of the Notice of Right to Sue.)

What is the date on the Notice?

AUGUST 23, 2017

When did you receive the Notice?

SEPTEMBER 05, 2017

☐ No

VI. RELIEF

The relief I want the court to order is (check only those that apply):

☐ direct the defendant to hire me

☐ direct the defendant to re-employ me

☐ direct the defendant to promote me

☐ direct the defendant to reasonably accommodate my religion

☐ direct the defendant to reasonably accommodate my disability

☒ direct the defendant to (specify) (if you believe you are entitled to money damages, explain that here)

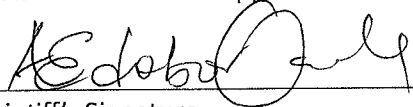
RESTORE ME TO MY ORIGINAL TITLE OF HIRE,
PAY ALL OWED SALARIES, INCLUDING INDUCED
LATENCIES, TRAVEL TIME DEDUCTIONS, LEGAL FEES INCURRED,
DAMAGES DONE DUE TO LOSS OF ACCOMODATION, IN
MONETARY VALUE, AND FINALLY STOP THE CORRUPTION,
I.E., NEPOTISM.

VII. PLAINTIFF'S CERTIFICATION

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated NOVEMBER 14, 2017 Plaintiff's Signature 
 First Name AUGUSTINE Middle Initial O Last Name EDOBOR-OSULA, SR
 Street Address 151 WEST 145TH STREET, APT. 5A
 County, City NEW YORK State NY Zip Code 10039
 Telephone Number (347) 481-7879 Email Address (if available) OSULASR@GMAIL.COM

I have read the attached Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: **Augustine Edobor-Osula**
57 Herkimer Street Apt. 607
Brooklyn, NY 11216

From: **New York District Office**
33 Whitehall Street
5th Floor
New York, NY 10004



On behalf of person(s) aggrieved whose identity is
 CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

16G-2017-01380

Holly M. Woodyard,
State & Local Program Manager

(212) 336-3643

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:



The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.



Your allegations did not involve a disability as defined by the Americans With Disabilities Act.



The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.



Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge



The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.



The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.



Other (briefly state)

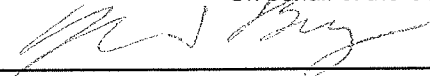
- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission



Kevin J. Berry,
District Director

August 23, 2017

(Date Mailed)

Enclosures(s)

cc:

Attn: Margo Ferrandino
CITY OF NEW YORK
DEPARTMENT OF HOUSING
Office of Legal Affairs
100 Gold Street
New York, NY 10038